

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Graves for Congress

Full Name (Last, First, Middle Initial)

A. Country Club Bank

Mailing Address PO Box 410889

City	State	Zip Code
Kansas City	MO	64141-0889

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		20		2015

Amount of Each Disbursement this Period

343.88

Transaction ID : B-E-23271

Original vendors exceeding reporting threshold itemized as memo transactions.

B. Capitol Hill Club

Mailing Address 300 1st Street SE

City	State	Zip Code
Washington	DC	20003-1801

Purpose of Disbursement
Restaurant Catering ExpenseCategory/
Type

Office Sought:	House	Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		26		2015

Amount of Each Disbursement this Period

107.31

Transaction ID : B-S-22354

[MEMO ITEM]

Subitemization of Country Club Bank(02/20/15)

c. Country Club Bank

Mailing Address PO Box 410889

City	State	Zip Code
Kansas City	MO	64141-0889

Purpose of Disbursement
Credit Card Payment

001

Candidate Name

Category/
Type

Office Sought:	House	Disbursement For: 2016	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
	Senate		
	President		

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		23		2015

Amount of Each Disbursement this Period

3361.04

Transaction ID : B-E-23258

Original vendors exceeding reporting threshold itemized as memo transactions.

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3704.92